

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 219388US2 CONT

First Inventor or Application Identifier: Eishun TSUCHIDA

Title: PHOTOREDUCTION METHOD FOR HEMOGLOBIN-VESICLE

Assignee Name: JAPAN SCIENCE AND TECHNOLOGY CORPORATION

Assignee Address: 1-8, Honcho 4-chome, Kawaguchi-shi, Saitama 332-0012 Japan

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2.  Specification Total Sheets **28**

3.  Formal Drawing(s)  
(35 U.S.C. 113) Total Sheets **1**

4.  Oath or Declaration Total Pages **2**

a.  Newly executed (original or copy)  
b.  Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation / divisional w/ box 17 completed)

i.  DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in  
the prior application, see 37 C.F.R. § 1.63(d)(2) and  
1.33(b)

CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)

Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

a.  Computer Readable Form (CRF)

b. Specification or Sequence Listing on:

i.  CD-ROM or CD-R (2 copies); or  
ii.  Paper

c.  Statements verifying identity of above copies

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

**ACCOMPANYING APPLICATION PARTS**

7.  Assignment Papers (cover sheet & document(s))  
(3 sheets)
8.  Application Data Sheet. See 37 CFR 1.76 (3 sheets)
9.  37 C.F.R. §3.73(b) Statement  Power of Attorney  
(when there is an assignee)
10.  English Translation Document (if applicable)
11.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS  
Citations (18)
12.  Preliminary Amendment
13.  White Advance Serial No. Postcard
14.  Certified Copy of Priority Document(s) (1)  
(if foreign priority is claimed)
15.  Applicant claims small entity status.  
See 37 CFR 1.27
16.  Other: Request for Priority;  
International Search Report (w/ Translation  
of Categories);  
Statement of Relevancy

**17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:**

Continuation of prior application no.: International PCT No. PCT/JP00/09198, filed December 25, 2000

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. Amend the specification by inserting before the first line the sentence:**

This application is a  Continuation  Division  Continuation-in-part (CIP)  
of application Serial No. Filed on

Which was published in English

Which was not published in English

This application claims priority of provisional application Serial No. Filed

**19. CORRESPONDENCE ADDRESS**



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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Eishun TSUCHIDA, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: PHOTOREDUCTION METHOD FOR HEMOGLOBIN-VESICLE

## FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	3 - 20 =	0	$\times$ \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	$\times$ \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			$+$ \$280 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			$+$ \$130 =	\$0.00
			BASIC FEE	\$740.00
			TOTAL OF ABOVE CALCULATIONS	\$740.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			$+$ \$130 =	\$0.00
<input checked="" type="checkbox"/> RECORDATION OF ASSIGNMENT			$+$ \$40 =	\$40.00
			TOTAL	\$780.00

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A duplicate copy of this sheet is enclosed.

 A check in the amount of \$780.00 to cover the filing fee is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.

A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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